2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004
Secretary of State

DOCUMENT# P03000120875

Entity Name: WILSON LIFE STYLE, CORP.

Current Principal Place of Business:

1021 S. HIAWASSEE RD. #3922
ORLANDO, FL 32835

New Principal Place of Business:

1057 S. HIAWASSEE RD. # 1912
ORLANDO, FL 32835

Current Mailing Address:

1021 S. HIAWASSEE RD. #3922
ORLANDO, FL 32835

New Mailing Address:

1057 S. HIAWASSEE RD. #1912
ORLANDO, FL 32835

FEI Number: 20-0331394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONTAXGONZALEZ SERVICE, CORP., STE. 102
4142 W. OAKRIDGE RD.
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LOPEZ, WILSON
Address: 1021 S. HIAWASSEE RD. #3922
City-St-Zip: ORLANDO, FL 32835

Title: V ( ) Delete
Name: CANES, OLGA C
Address: 1021 S. HIAWASSEE RD. #3922
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOPEZ, WILSON
Address: 1057 S. HIAWASSEE RD. #1912
City-St-Zip: ORLANDO, FL 32835

Title: V (X) Change ( ) Addition
Name: CANAS, OLGA C
Address: 1057 S. HIAWASSEE RD. #1912
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILSON LOPEZ PDTE 07/12/2004

Electronic Signature of Signing Officer or Director — Date